Fill in this inforr	nation to identif	y your case:				
Debtor 1	Pauline First Name	Middle Name	Coronado-Newton Last Name	- Che	eck if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	- I	An amended filing	
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF TEXAS			A supplement showing postpetition chapter 13 income as of the following date	
Case number (if known)	20-33047-hdh-1	3			MM / DD / YYYY	

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1	Describe	Empl	avmant
	DESCLIDE	LIIIDI	OVIIIGIIL

I. Fill in your employment information. If you have more than one job, attach a separate page with information about		Employment status		r 1 mployed ot employed			☑ Emp	or non-filing soloyed	oous	se	_
	additional employers.	Occupation	Self Employed			Police Officer					
	Include part-time, seasonal, or self-employed work. Employer's name		Coab Contractors LLC			DCCCD					
	Occupation may include student or homemaker, if it applies.	Employer's address 2805 N. Britain Rd. 1601 S. Lam							_		
			Irving		TX State	75062 Zip Code	Dallas City		X	75215 Zip Code	_
		How long employed th		2 Yrs		_	•	ſrs		_	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

Car Dabter 1

Far Dahtar 2 ar

			—————	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$5,316.11
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$5,316.11

Deb	Pauline Coronado-Newton		Case nu	mbe	r (if know	/n) 20	<u>-33</u> (047-hdh-13
			For Debtor 1		or Debto on-filing		<u> </u>	
	Copy line 4 here	→ 4.	\$0.00		\$5,3	16.11		
5.	List all payroll deductions:		**		^ -	40.44		
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00			18.14		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			06.59		
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			00.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00			\$0.00		
	5e. Insurance	5e.	\$0.00			32.73		
	5f. Domestic support obligations	5f.	\$0.00			\$0.00		
	5g. Union dues	5g.	\$0.00			\$0.00		
	5h. Other deductions. Specify:	5h. -	\$0.00			\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	+ 6.	\$0.00		\$1,6	57.46		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	4. 7.	\$0.00		\$3,6	58.65		
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$1,233.33			\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00			\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00			\$0.00		
	8e. Social Security	8e.	\$743.00			\$0.00		
	8f. Other government assistance that you regularly receive							
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00			\$0.00		
	8g. Pension or retirement income	 8g.	\$0.00			\$0.00		
	8h. Other monthly income. Specify:	8h. -	\$0.00			\$0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	n. 9.	\$1,976.33			\$0.00]	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$1,976.33	+	\$3,6	558.65]=[\$5,634.98
11	State all other regular contributions to the expenses that you list in							
•••	Include contributions from an unmarried partner, members of your hous friends or relatives.	sehold, y	our dependents, yo	ur ro	ommates	s, and ot	her	
	Do not include any amounts already included in lines 2-10 or amounts t		. ,	expe	enses list			
	Specify:					_ 11.	+,	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liability if it applies					12.		\$5,634.98 Combined
13	if it applies. Do you expect an increase or decrease within the year after you file	e this fo	rm?					monthly income
	✓ No. None.						—	
	Yes. Explain:							

Debtor 1 Pauline Coronado-Newton		Case number (if known)	20-33047-hdh-13
8a. Attached Statement (Debtor 1)			
	Coab Contractors LLC		
Gross Monthly Income:			\$6,000.00
Expense	Category	Amount	-
Advertising	Advertisement	\$116.67	
sub contractors	sub Contractors	\$3,400.00	
Professional Fees	Professional Fees	\$133.33	
Office Supplies	Office Supplies	\$141.67	
Auto Fuel/maintenance	Gasoline/maintenance	\$275.00	
materials	Materials/lease/equipment	\$700.00	
Total Monthly Expenses			\$4,766.67
Net Monthly Income:			\$1,233.33

Ī	ill in this inform	nation to id	entify	your case:			Cha	als if this	, io.	
	Debtor 1	Pauline			Coro	nado-Newton		ck if this An ame	ended filing	
	20000.	First Name		Middle Name	Last Na				lement showing	postpetition
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	ame	- -		r 13 expenses a ng date:	as of the
	United States Bankı	untey Court fo	or the	NORTHERN F	ISTRICT O	F TFXAS			D ///000/	
	Case number	20-33047-I			<u> </u>	T LATO	-	MM / D	D / YYYY	
	(if known)									
<u>O</u>	fficial Form 10	<u>6J</u>								
S	chedule J: Yo	ur Expe	nses							12/15
nai	as complete and a rrect information. If me and case number art 1:	more space	is need Answe	led, attach anot er every questio	her sheet to t					
1.	Is this a joint cas									
2.	✓ No. Go to lin Yes. Does D No Yes Do you have dep	e 2. ebtor 2 live in b. Debtor 2 m endents?	ust file (J-2, Expense	s for Separate Hous Dependent's rela	tionshi		Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and		or each depende			or 2		age	live with you? ☐ No
	Do not state the denames.	ependents'				Daughter			<u>20 Yrs</u>	− ☑ Yes □ No
										−
										− ∏ Yes □ No
										- ☐ Yes
										☐ No
										− □ Yes
3.	Do your expense expenses of peop yourself and you	ole other than		✓ No ☐ Yes						
j	Part 2: Estima	ate Your O	ngoing	g Monthly Ex	penses					
to	timate your expens report expenses as a form and fill in the	of a date after	er the b		-	_			-	
	lude expenses paid ch assistance and l		_		-				Your expen	ses
4.	The rental or hon Include first mortg							•	4	\$1,450.00
	If not included in	line 4:		-						
	4a. Real estate ta	axes							4a	
	4b. Property, hon	neowner's, or	renter's	insurance					4b	
	4c. Home mainte	nance, repair,	and up	keep expenses					4c	\$28.00
	4d Homeowner's	association o	or condo	minium dues					 4d	

Debtor 1		Pauline Coronado-Newton	Case number (if known)	20-33047-hdh-13
			Your e	expenses
5.	Addi	tional mortgage payments for your residence, such as home equity loans	5	
6.	Utiliti	ies:		
	6a.	Electricity, heat, natural gas	6a	\$200.00
	6b. '	Water, sewer, garbage collection	6b	\$50.00
		Telephone, cell phone, Internet, satellite, and cable services	6c	\$125.00
	6d.	Other. Specify: Cell Phone	6d	\$400.00
7.	Food	and housekeeping supplies	7	\$500.00
8.	Child	Icare and children's education costs	8	
9.	Cloth	ning, laundry, and dry cleaning	9	\$50.00
10.	Pers	onal care products and services	10	\$75.00
11.	Medi	cal and dental expenses	11	\$400.00
		sportation. Include gas, maintenance, bus or train Do not include car payments.	12	\$200.00
		rtainment, clubs, recreation, newspapers, azines, and books	13	
14.	Char	itable contributions and religious donations	14	
		rance. ot include insurance deducted from your pay or included in lines 4 or 20.		
	15a.	Life insurance	15a	
	15b.	Health insurance	15b	
	15c.	Vehicle insurance	15c	\$250.00
	15d.	Other insurance. Specify:	15d.	
	Taxe Spec	, , ,	16.	
		Ilment or lease payments:		
	17a.	Car payments for Vehicle 1 Vehicle Payment	17a.	\$696.00
	17b.	Car payments for Vehicle 2 motorcycle payment - husband	17b	\$222.00
	17c.	Other. Specify:	17c	
	17d.	Other. Specify:		
18.	Your	payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$400.00
		usal support - paid by husb		
	Othe Spec	r payments you make to support others who do not live with you.	19.	
	ohec	"y		

Deb	tor 1	Pauline Coronado-Newton	Case number (if known)	20-33047-hdh-13
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Othe	r. Specify:	21	
22.	Calcu	ulate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$5,046.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$5,046.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$5,634.98
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$5,046.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$588.98
24.	Do yo	ou expect an increase or decrease in your expenses within the year after y	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do your to increase or decrease because of a modification to the terms of your mor	. ,	
		No		
	V	Yes. Explain here: husband is on alot of medications currently. Has been in the	hospital for 4 weeks as of	1/11/21
		The book in the		

Fill in this information to identify your case:							
Debtor 1	Pauline		Coronado-Newton				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS						
Case number (if known)	20-33047-hdh-13						

✓ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

301	ledules after you file your original forms, you must fill out a new Summary and check the box at the top of this	Jaye.
Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$64,617.43
	1c. Copy line 63, Total of all property on Schedule A/B	\$64,617.43
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$89,144.91
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1,700.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$121,907.32
	Your total liabilities	\$212,752.23
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,634.98
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,046.00

Debto	Pauline Coronado-Newton Case	e number (if known) _ 20-33047-hdh-13							
Pai	4: Answer These Questions for Administrative and Statistical	Records							
6. /	Are you filing for bankruptcy under Chapters 7, 11, or 13?								
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 								
7. \	. What kind of debt do you have?								
İ	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.								
l	Your debts are not primarily consumer debts. You have nothing to report on this this form to the court with your other schedules.	s part of the form. Check this box and submit							
	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$6,136.74								
9. (Copy the following special categories of claims from Part 4, line 6 of Schedule E/F.	•							
		Total claim							
ı	From Part 4 on Schedule E/F, copy the following:								
ę	Pa. Domestic support obligations. (Copy line 6a.)	\$0.00							
(9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00							
9	Oc. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>							
(9d. Student loans. (Copy line 6f.)	\$49,234.00							
ę	De. Obligations arising out of a separation agreement or divorce that you did not report priority claims. (Copy line 6g.)	as \$0.00							
9	of. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00							

9g. Total. Add lines 9a through 9f.

\$49,234.00

Fill in this information to identify your case:				
Debtor 1	Pauline First Name	Middle Name	Coronado-Newt	ton
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS				
Case number (if known)	20-33047-hdh-13			

✓ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below				
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?			
☑ No				
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.				
X /s/ Pauline Coronado-Newton Pauline Coronado-Newton, Debtor 1	X Signature of Debtor 2			
Date <u>03/24/2021</u> MM / DD / YYYY	Date			